

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Jerry H. Stoller	Customer No.	23,444
Serial No.:	10/677,708	Art Unit:	1616
Date Filed:	October 2, 2003	Examiner:	Alton Nathaniel Pryor
For:	Controlling Plant Pathogens and Pests with Applied or Induced Auxins	Atty. Docket No.	SOR028/189341

TRANSMITTAL

Mail Stop Amendments
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

- Transmitted herewith is a response to the Office Action mailed December 8, 2009.
- Applicant is
 - ☒ a small entity.
 - ☐ other than a small entity
- The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.
(complete, as applicable)
 - ☐ Applicant petitions for an extension of time under 37 C.F.R. § 1.136 (fees: 37 C.F.R. § 1.17(a)(1)-(4) for the total number of months checked below:

	Extension (months)	Fee <u>large entity</u>	Fee for <u>small entity</u>
<input type="checkbox"/> one month	\$	130.00	\$ 65.00
<input type="checkbox"/> two months	\$	490.00	\$ 245.00
<input checked="" type="checkbox"/> three months	\$	1,110.00	\$ 555.00
<input type="checkbox"/> four months	\$	1,730.00	\$ 865.00
<input type="checkbox"/> five months	\$	2,350.00	\$ 1,175.00
			Fee: \$ <u>555.00</u>

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

- ☐ An extension for ____ months has already been secured. The fee paid therefor of \$ ____ is deducted from the total fee due for the total months of extension now requested.
- ☒ Extension fee due with this request \$ 555.00

OR

- ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-(d) has been calculated as shown below:

Claims Remaining After Amendment	Highest No. Previously Paid For	Extra Present	Rate	Added Fee
Total: 63	70	0	\$52/26	\$0.00
Independent: 8	8	0	\$220/110	\$0.00
First Presentation of Multiple Dependent Claims:			\$390/195	\$0.00
Total Additional Fees:				\$0.00

(complete (c) or (d), as applicable).

- ☒ No additional fee for claims is required.

OR

- ☐ Total additional fee for claims required \$ 0.00

FEE PAYMENT

5. ☐ Attached is our check in the sum of \$ _____.
- ☐ Attached is our check in the sum of \$ _____ for a petition to revive an application.
- ☒ Charge Account No. 50-0897 (SOR028/189341) the sum of \$ 555.00

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Account No. 50-0897 (SOR028/189341)

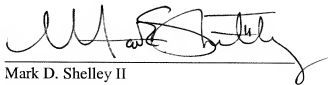
AND/OR

- ☒ If any additional fee for claims is required, charge Account No. 50-0897 (SOR028/189341)

Respectfully submitted,

Date: _____

June 8, 2010



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